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NOTICE OF ALLOWANCE AND FEE(S) DUE

43076

7590

11/15/2005

MARK D. SARALINO (GENERAL) RENNER, OTTO, BOISSELLE & SKLAR, LLP 1621 EUCLID AVENUE, NINETEENTH FLOOR CLEVELAND, OH 44115-2191 EXAMINER

PAPER NUMBER

NGUYEN, TRINH T

3644

DATE MAILED: 11/15/2005

ART UNIT

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/609,235	06/27/2003	Richard Dryer	02W192	7732

TITLE OF INVENTION: PROJECTILE WITH PROPELLING CHARGE HOLDER

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	APPLN. TYPE	PPLN. TYPE SMALL ENTITY		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
	nonprovisional	NO	\$1400	\$300	\$1700	02/15/2006

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

- A. If the status is the same, pay the TOTAL FEE(S) DUE shown above
- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
- B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.
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- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

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CURRENT CORRESPONDENCE	IS. TE ADDRESS (Note: Use Block 1 for a	my change of address)	-	Note: A certificate o	f mailing can only be used for	or domestic mailings of the	
				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must			
43076 7590 11/15/2005				have its own certificate of mailing or transmission.			
MARK D. SARA	LINO (GENERAL)			Ce	ertificate of Mailing or Trans	mission	
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1621 EUCLID AV	FLOOR		addressed to the Ma	il Stop ISSUE FEE address	above, or being facsimile		
CLEVELAND, OH	1 441 13-2191				110 (311) 273 2003, 011 410 4	(Depositor's name)	
						(Signature)	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVER	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
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APPLN. TYPE	SMALL ENTITY	ISSUE FE		UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
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EXAM	INER	ART UNI	IT CLASS-SUBCLASS		J		
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1. Change of correspondence CFR 1.363).	e address or indication of "Fe	e Address" (37		the patent front page, l			
Change of correspond	ence address (or Change of 0	Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of of this form is NOT	lata will appear on 'a substitute for filin	the patent. If an assig g an assignment.	nee is identified below, the d	ocument has been filed for	
(A) NAME OF ASSIGNE	EE	(B)	RESIDENCE: (CIT	Y and STATE OR CO	OUNTRY)		
Diagonal - 1, 41		t - 6111 4 h t			Corporation or other private gro	∩	
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			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to				
			Deposit Account Nu	mber	(enclose an extra c	opy of this form).	
_ `	(from status indicated above) MALL ENTITY status. See 3		Dr. Amelianetian	a langua alaimin a SMA	ALL ENTITY status. Sec 37 Cl	ED 1 27/\/2\	
					sly paid issue fee to the applica gistered attorney or agent; or the		
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Authorized Signature	-			Date		· 	
Typed or printed name			Registration No.				
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